

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 161696784
FILING DATE

APPLICANT

CLAIMS

CLAIM NUMBER	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS	4	0	0	0	0	0

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS

CLAIM NUMBER	IND.	DEP.	IND.	DEP.	IND.	DEP.
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*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office